

activeMEDICAL

Staebel Sovereign Wheelchair

Prescription Form



Form Information

Dealer Information

Date	/	/	Sales Rep	
Street Address			Email	
Suburb			Phone	
Postcode		State	Fax	

Client Information

Date	/	/	Full Name	
Contact			Street Address	
Funding Number			Suburb	
Plan Date - Start to Finish		to	Postcode	State
Plan Manager			Client Weight	kg

Funding Type

<input type="checkbox"/>	M.A.S.S.	<input type="checkbox"/>	NDIS	<input type="checkbox"/>	Homecare Package	<input type="checkbox"/>	Other: _____
--------------------------	----------	--------------------------	------	--------------------------	------------------	--------------------------	--------------

Prescriber Information

Date	/	/	Email	
Full Name			Street Address	
Organisation			Suburb	
Mobile			Postcode	State
Office Phone				

Comments

Wheelchair Specifications

Seat Width (SWL 125kg)

370mm	400mm	430mm	460mm	490mm
-------	-------	-------	-------	-------

Seat Width (SWL 170kg)

520mm	550mm	580mm
-------	-------	-------

Seat Depth (SWL 125kg)

400mm	425mm	450mm	475mm	500mm
-------	-------	-------	-------	-------

Seat Depth (SWL 170kg)

450mm	475mm	500mm
-------	-------	-------

Front Seat Height

420mm	445mm	450mm	470mm	475mm	500mm
-------	-------	-------	-------	-------	-------

Rear Seat Height

410mm	430mm	450mm	470mm	490mm	510mm
-------	-------	-------	-------	-------	-------

Rear Wheel Specifications

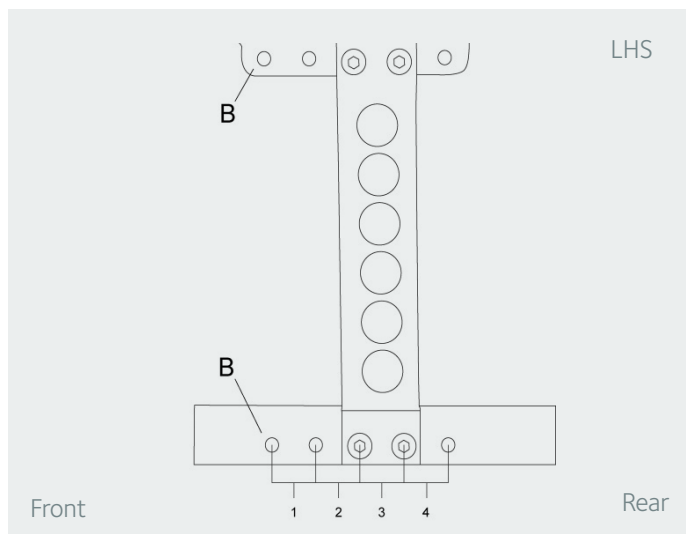
Rear Wheel Size (* 12" transit option only available on products up to 490mm seat width - Not available on 170kg model)

24" Solid tyre - as standard	12" Transit option*
------------------------------	---------------------

Rear Wheel Position

- Position 1
- Position 2
- Position 3
- Position 4

Specify position of rear wheel as per diagram. (B shows Rear Wheel Horizontal position).



Rear Wheel Specifications Cont.

Standard Hollow push Rim

Drum Brake Option, includes brake, cable and wheels

One Arm Drive Kit with double push rim

Mounted Left

Mounted Right

Rear Wheel Accessories

Amputee brackets, Pair

Anti tip bars with inbuilt tip assist, Pair

Brakes (Wheel Lock - Brake Lever Extension)

Left

Right

Backrest Height

400mm

420mm

440mm

460mm

Backrest Angle (If no specified, backrest angle standard at 90°.)

85°

90°

95°

100°

105°

Footrest Setting- Footplate/lower leg length (Adjustable from 40-48cm - 2cm increments)

400mm

420mm

440mm

460mm

480mm

Footplate Assembly Individual angle - adjustable footplates, adjustable to close gap)

Footplate width - adjustable 105-155mm. If applicable specify setting:

mm

Back Upholstery

Adaptable - upholstery colour black

Push Handles

Standard height adjustable and detachable

Side Panel

Flip Back Height - adjustable armrest with removable mounted arm pad, 330mm long, sliding. Standard option.

Armrest Height - adjustable from 18-26cm (2cm increments)

Armrest Pad Position - adjustable from 33-45cm (2cm increments)

Other Accessories

Elevating Legrests

Left

Right



Stump Support

Left

Right



Calf Strap



Headrest Kit



IV Pole



Pelvic Strap



Tray



Oxygen Bottle Carrier



Requires Cushion

Yes*

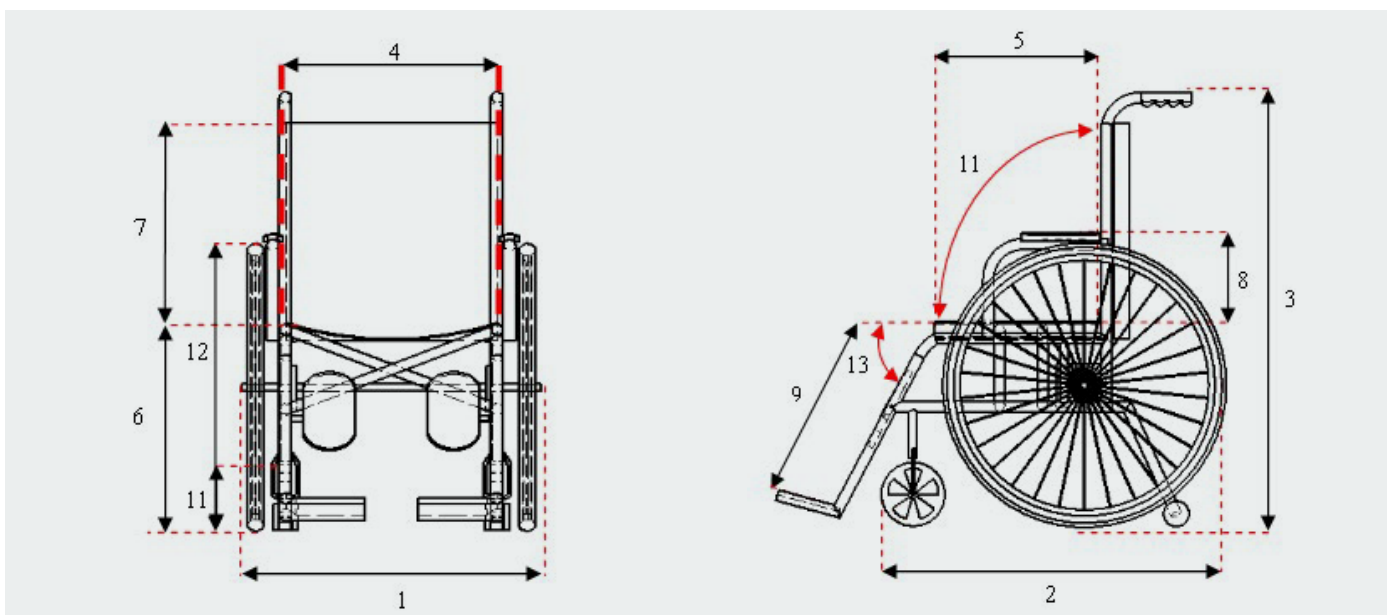
No

*Cushion Type:

Comments

Wheelchair Specifications Explanation

1.	Overall Width	7.	Backrest Height
2.	Overall Length	8.	Armrest Height
3.	Overall Height	9.	Seat to Footplate Height
4.	Seat Width	10.	Seat to Backrest Angle (Degree of Recline)
5.	Seat Depth	11.	Castor Size
6.	Seat to Floor Height	12.	Rear Wheel Size



Comments

Save As

Print

Email

activeMEDICAL
SUPPLIES > SOLUTIONS > SUPPORT

P. 1800 267 267 | **F.** 07 3899 8825
E. hello@activemedicalsupplies.com.au

www.activemedicalsupplies.com.au